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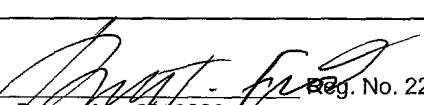
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UTILITY PATENT APPLICATION TRANSMITTAL		<i>Title of Invention</i>	INFORMATION PROCESSING APPARATUS, DEFECT ANALYSIS PROGRAM, DEFECT ANALYSIS METHOD, AND APPLICATION PROGRAM DEVELOPMENT ASSISTANCE SYSTEM
		<i>Named Inventor(s)</i>	NOBUYUKI YAMAUCHI; NATSUMI MATSUMOTO; AKIRA SAWAOKA
<i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		<i>Attorney Docket</i>	44471/251413
		<i>Express Mail Label No.</i>	EL561430435US

APPLICATION ELEMENTS		<i>Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, D.C. 20231</i>
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i>		7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy <i>(identical to computer copy)</i> c. <input type="checkbox"/> Statement verifying identity of above copies
2. <input type="checkbox"/> Applicant claims Small Entity status		8. <input type="checkbox"/> Assignment: a. <input type="checkbox"/> Assignment Papers <i>(cover sheet & document(s))</i> b. <input type="checkbox"/> Assignment is of record in parent application No. _____
3. <input checked="" type="checkbox"/> Specification, Claims, and Abstract		9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney by assignee
4. <input checked="" type="checkbox"/> Drawings		10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
5. Oath or Declaration		11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
a. <input type="checkbox"/> Newly executed (original or copy)		12. <input type="checkbox"/> Preliminary Amendment
b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 16 completed)</i>		13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		14. <input type="checkbox"/> Certified Copy of Priority Document(s)
(i) <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		15. <input type="checkbox"/> Other: _____
6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i>		
16. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Recite complete dependency back to first parent application: _____		
17. CORRESPONDENCE ADDRESS: ROGER T. FROST KILPATRICK STOCKTON LLP 2400 Monarch Tower 3424 Peachtree Road, N.E. Atlanta, Georgia 30326		

By: 
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FEE TRANSMITTAL

Attorney Docket No. 44471/251413

(13700)

This sheet accompanies a patent application transmittal for the following application:

Inventor(s): **Nobuyuki Yamauchi, et al.**Filing Date: **Concurrently Herewith****Title: INFORMATION PROCESSING APPARATUS, DEFECT ANALYSIS PROGRAM,
DEFECT ANALYSIS METHOD, AND APPLICATION PROGRAM
DEVELOPMENT ASSISTANCE SYSTEM**

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The filing fee is calculated as shown below:

1. FILING FEE:

FOR:	SMALL ENTITY		LARGE ENTITY	
	FEE	FEE PAID	FEE	FEE PAID
<input checked="" type="checkbox"/> UTILITY FILING FEE	\$355		\$710	\$710
<input type="checkbox"/> DESIGN FILING FEE	\$160		\$320	
<input type="checkbox"/> PLANT FILING FEE	\$245		\$490	
<input type="checkbox"/> REISSUE FILING FEE	\$355		\$710	
<input type="checkbox"/> PROVISIONAL FILING FEE	\$75		\$150	
	SUBTOTAL (1)	\$xxx		\$710

2. CLAIMS:

FOR:	SMALL ENTITY		LARGE ENTITY	
	NO. FILED	NO. EXTRA	RATE	FEE
TOTAL CLAIMS	20 - 20 =	0	x 9 =	
INDEP. CLAIMS	4- 3 =	1	x 40 =	
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED		+135 =		+270 =
	SUBTOTAL (2)		\$xxx	\$80

3. ADDITIONAL FEES:

FOR:	SMALL ENTITY		LARGE ENTITY	
	FEE	FEE PAID	FEE	FEE PAID
<input checked="" type="checkbox"/> LATE FILING, FEE OR OATH	\$65		\$130	\$130
<input type="checkbox"/> NON-ENGLISH SPECIFICATION	\$130		\$130	
<input type="checkbox"/> OTHER				
	SUBTOTAL (3)	\$xxx		\$130

TOTAL FILING FEES: \$920A check is enclosed for the total amount: **\$920** Charge any additional fees required under 37 C.F.R. 1.16 or 1.17 to Deposit Account 11-0855.

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